

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MM	5001	
O.I.P.E. CLASSIFIER	ER	825	7-11-00
FORMALITY REVIEW	MM	825	8/14
RESPONSE FORMALITY REVIEW	MM	625	02-05-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Final	Original	Date
1	✓	✓	5-27-04
2	✓	✓	
3	✓	✓	
4	✓	✓	
5		✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
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47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	5-27-04
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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